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Effective on 12/08/2004.				Complete If Known			
Fees physual to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 09/921,2		228	
/ FEE TRANSMITTAL				ling Date 08/01/2001		001	
NOV 13 2006 Spr FY 2006			F	First Named Inventor MENDEZ, I		Z, Daniel J.	
\ 4				Examiner Name HARRELL		LL, Robert E	3.
policant claims small entity status. See 37 CFR 1.27			Ā	Art Unit 2142			
TOTAL AMOUNT OF PAYMENT		(\$)1020		Attorney Docket No. 25587-0		33-075	
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order Other (please identify):							
Deposit Account Deposit Account Number: 50-1847 Deposit Account Name: Manatt, Phelps & Phillips, LLP							
For the above-iden	tified deposit	account, the Direct	or is hereby	authorized to: (che	ck all that apply	/)	
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s)							
under 37 CFR WARNING: Information on the information and authorization	is form may	become public. Credi	t card inform	·		form. Provide cred	lit card
FEE CALCULATION (All the fee	s below are due	upon filin	g or may be sub	ject to a sur	harge.)	
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINA	EXAMINATION FEES	
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
<u>Application Type</u> Utility	300	150	500	250	200	100	10031 010 (4)
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	<u> </u>
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FE		100	U	O	U	-	mall Entity
Fee Description						<u>=</u> Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)							25
Each independent claim over 3 (including Reissues)							100
Multiple dependent claims						360	180
) <u>Fees</u>	Paid (\$)		Multiple Depe Fee (\$)	ndent Claims Fee Paid (\$)
- 20 or HP HP = highest number of total c		if greater than 20				<u>ree (\$)</u>	ree Faid (\$)
Indep. Claims	Extra Cl) Fees	Paid (\$)			
- 3 or HP	·	x :==1x	=				
HP = highest number of indepe	endent claims	paid for, if greater than	3				
3. APPLICATION SIZE	FEE						
If the specification	and drawin	igs exceed 100 sh	eets of par	er (excluding ele	ctronically fi	led sequence or	computer
listings under 37 C	` ' '			•	or small entit	y) for each addi	tional 50
sheets or fraction th			(1)(G) and	37 CFR 1.16(s).	tion though	Eac (\$)	Foo Boid (\$)
<u>Total Sheets</u> <u>E</u> - 100 =	xtra Sheets	/50=		dditional 50 or frac		<u>Fee (\$)</u>	Fee Paid (\$)
4. OTHER FEE(S)			(,	 	Fee Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): Petition for 3 months extension of time 1020							
SUBMITTED BY	7 -						
Signature	livite	DUN		gistration No. 53,3 orney/Agent)	18	Telephor	ne 650-812-1375
Name (PrintType) Pargela S. Merkadeau)							vember 6, 2006

11/14/2006 RFEKADU1 00000104 501847 09921228

1020.00 DA

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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